STATEMENT OF CLAIM TO THE NEW HAMPSHIRE BAR ASSOCIATION PUBLIC PROTECTION FUND COMMITTEE

(It is recommended by the Committee that you consult with an attorney in filing this claim)

Your address:				
Your telepho	one number:			
If you are re	presented by an attorney in making this claim, please	provide the atto		
Nam	e:			
Addı	ress:			
Tele	phone number:			
Name and a	ddress of the lawyer who you claim caused your loss:			
State the dat	the when you originally hired the lawyer listed in 5, above business for which that lawyer was hired:	ove, and the ger		
State the dat	e when you originally hired the lawyer listed in 5, about	ove, and the ger		
State the dat	e when you originally hired the lawyer listed in 5, about	ove, and the ger		
State the dat nature of the	te when you originally hired the lawyer listed in 5, about the business for which that lawyer was hired:	ove, and the ger		
State the dat nature of the A.	when you originally hired the lawyer listed in 5, above business for which that lawyer was hired: When was that lawyer suspended? or	Date:/_/		
State the dat nature of the A. B.	when you originally hired the lawyer listed in 5, above business for which that lawyer was hired: When was that lawyer suspended? or When was that lawyer disbarred? or	Date:/_/		
State the dat nature of the A. B. C. D.	when you originally hired the lawyer listed in 5, above business for which that lawyer was hired: When was that lawyer suspended? or When was that lawyer disbarred? or When was that lawyer adjudged incompetent? or	Date:/_/ Date:/_/ Date:/_/ Date:/_/		

	State when you discovered your loss and describe the manner in which the loss came your attention:				
have	the total amount of the actual theft. Note: Do <u>not</u> include, for example, money spent attempting to recover such funds or properties or any other monies. Describer the theft was of money, securities, real estate or other property:				
A.	Have you called the theft to the attention of the lawyer who you claim caused your loss, and his/her law firm?				
B.	Has that lawyer or law firm paid back any portion of the loss? Yes No				
C.	If so, how much? \$				
State	the names, addresses and telephone numbers of all other persons familiar with				
State	e the names, addresses and telephone numbers of all other persons familiar with				
State	the names, addresses and telephone numbers of all other persons familiar with of the claim:				
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State facts Desc	e the names, addresses and telephone numbers of all other persons familiar with of the claim: cribe in detail all efforts you have made to recover the loss described in 8, above Have you sued any person for the loss you claim you sustained? If so, please				

	Have you made a claim to any other state's public protection fund (or similar fund, by whatever name it is called)? If so, please describe:				
E.	Describe any other efforts you have made to recover your loss:				
or his	e you ever recovered any money, apart from any monies recovered from the lawyer s/her law firm, from any person for the loss described? Yes No If yes, e identify the person and how much was recovered.				
	se state any additional facts which you think would assist the Committee in lating your claim. Attach additional pages if needed.				
	ch any bank or account statements, canceled checks, copies of letters, or any other ments relating to your claim.				
Supre					
Supre	eme Court Rule 55 requires that you transfer your claim to the Public Protection (see attached subrogation agreement). Will you transfer your claim to the Public				
Supre	ments relating to your claim. eme Court Rule 55 requires that you transfer your claim to the Public Protection (see attached subrogation agreement). Will you transfer your claim to the Public ection Fund when your claim is paid by the Fund?				

STATE OF $_$		
COUNTY OF		
On this	day of	, personally appeared before me the above-
named		and swore that the above statements were true to the best of
his/her knowle	dge and belief.	
		Notary Public/Justice of the Peace
I certify that a	copy of the forego	ing was mailed to the accused on
Date		Signature